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MAY 13 2004

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7590 04/07/2004

Terrance A. Meador
 INCAPLAW
 1050 Rosecrans Street Suite K
 San Diego, CA 92106

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TERRANCE A. MEADOR		(Depositor's name)
<i>Terrance A. Meador</i>		(Signature)
May 10		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/697,943	10/26/2000	Mark Christopher Albrecht	AUGD01000001 C/M #103806	5690

TITLE OF INVENTION: EVALUATION OF BURST TEST RESULTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	YES	\$665	\$0	\$665	07/07/2004
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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NOORI, MAX H	2855	073-838000
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ARIZANT HEALTHCARE INC., Eden Prairie, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

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(Authorized Signature) *Terrance A. Meador* (Date) *5/10/2004*
TERRANCE A. MEADOR

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01 FC:2501
 02 FC:8001

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